LOBBYING EXPENDITURE REPORT COVERING JANUARY 1 THROUGH JUNE 30 DUE AUGUST 15 COVERING JULY 1 THROUGH DECEMBER 31 DUE FEBRUARY 15				Visit's Regi FOR OFF	ice usi	ONLY
Instructions Print in ink or type. Fill in Registration Number in spaces provided. Complete form and return to the Board of Ethics, 2415 Quail Dr., 3 Baton Rouge, LA 70808 (225) 763-8777 or (800) 842-6630. This form must be delivered or postmarked by the due date. This form may be faxed to (225) 763-8787.	^{al} Floor,			Postmark I I=RZ 1022:		104 5
1. Name LOY Stephen 1. Name LOY Stephen 2. Business Address 9412 Common States Street and No.		Men R	i-	LA State	7080°	<u>}</u>
Mailing Address Same 3. Business Phone (225) 927-8837 Area Code and Telephone Number				X	[46	X95
 Total of all expenditures made January 1 through June 3 (Include expenditures from Schedules A and B) Total of all expenditures made July 1 through December (When Applicable) (Include expenditures from Schedules A and 	r 31:	\$ \$	Ţ Ø		- 28 	
6. Total of all expenditures made during calendar year: (Line 4 added with Line 5 should equal Line 6)	Б	\$	Ø		-	
7. Did you make an expenditure exceeding \$50 on one occ	casion	for any c	one legis	lator:		
From July 1 through June 30?		No No		NA		
If the answer to either question in Number 7 above is YE for 500 Rev. 1900.	BS, ple	ase com	plete Sç	hedule A a	and attach	

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HAND DELIVERED

LOBBYING EXPENDITURE REPORT



15.53	Did you make expenditures exceeding					
	From January 1 through June 307	☐ Yes	×	No		
	From July 1 through December 317	☐ Yes	S	No		NA
	If the answer to either question in Nu	mber 8 above i	is YES, pl	ease con	nplete S	chedule A and attach.
9.	Did you expend funds for a reception legislature, either house, any standing created by resolution of either house, delegation thereof were invited durin	g committee, so subcommittee	of any cor	rittec, st	atutory	committee, committee
	□ Yes		20	No		
	if the answer to remindel a spoke is t	ES, please con	mplete Scl	redule E	and att	ach.
	If the answer to Number 9 above is Y	HS, please con	mplete Sci	nedule E	3 and att	ach.
		TIFICATION				ach.
	CER	TIFICATION	OF ACCL	IRACY		
	CER I hereby certify that the information of	TIFICATION contained herei	OF ACCL	IRACY	ect to the	e best of my knowledge
	CER	TIFICATION contained herei	OF ACCL in is true a nditures he	IRACY and corre	ect to the	e best of my knowledge led herein; and that no

Form 502, For. - 10/02